

FEC FORM 3L**REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS
AND LOBBYIST/REGISTRANT PACs**RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

OCT 25 AM 10:23

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Dewhurst for Texas

ADDRESS (number and street) 1210 SAN ANTONIO STREET SUITE 700

☐ Check if different than previously reported. (ACC) AUSTIN TX 78767
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00499350

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. STATE DISTRICT

TX
For Candidates Only

5. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)

☐ July 15
Quarterly Report (Q2)
and/or Semi-annual Report

☒ October 15
Quarterly Report (Q3)

☐ January 31
Year-End Report (YE)
and/or Semi-annual Report

☐ July 31 Mid-Year
Report (Non-election
Year - PAC/Party) (MY)
and/or Semi-annual Report

(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4) ☐ Jul 20 (M7) and/or Semi-annual Report ☐ Oct 20 (M10) ☐ Jan 31 (YE) and/or Semi-annual Report

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Special (12S) ☐ Convention (12C)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

This report also covers the semi-annual period

See Line 6(b)

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

This report also covers the semi-annual period

See Line 6(b)

6. Covered Period(s)

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

(b) Semi-annual Covered Period

This report covers 07 01 2011 through 09 30 2011 and/or January 1 - June 30 July 1 - December 31

7. Total Reportable Bundled Contributions by
Lobbyists/Registrants or Lobbyist/Registrant PACs

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

(b) Semi-annual Covered Period

100100.00

0.00

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dr. Carlos R. Hamilton Jr.

Signature of Treasurer

Dr. Carlos R. Hamilton Jr.

Date

10 15 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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02/2009

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